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REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

4764

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5,717,204, granted February 10, 1998, and for which a reissue patent is sought on the invention entitled Inspecting Optical Masks With Electron Beam Microscopy

the specification of which

☒ is attached hereto.

☐ was filed on _____ as reissue application number ____ / _____
and was amended on _____
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.

☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☒ by reason of other errors.

At least one error upon which reissue is based is described as follows:

My intent to claim all disclosed embodiments of the invention was not carried out through the course of prosecution of unnecessarily restrictive claims by my former attorney of record.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)

4764

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Name(s) Registration Number

Laura A. Majerus 33,417**Trinidad Arriola-Kern 44,012**

Correspondence Address: Direct all communications about the application to:

☐ Customer Number

OR

Type Customer Number here

Place Customer Number Bar
Code Label here☒ Firm or
Individual Name**Fenwick & West LLP**

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Two Palo Alto Square

Address

City

Palo Alto

State

CA

ZIP

94306

Country

U.S.A.

Telephone

(650) 494-0600

Fax

(650) 494-1417

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)

Dan Meisburger

Inventor's signature

Residence

Date

Post Office Address

Citizenship

Full name of second joint inventor (given name, family name)

Zhong-Wei Chen

Inventor's signature

Date

Residence

Citizenship

Post Office Address

Full name of third joint inventor (given name, family name)

Jack Y. Jau

Inventor's signature

Date

Residence

Citizenship

Post Office Address

☒ Additional joint inventors are named on separately numbered sheets attached hereto.

Please type a plus sign (+) inside this box → +

PTO/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 3 of 3

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Alan D.				Brodie			
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Hans				Dohse			
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Dennis G.				Emge			
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → +

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
John				Green			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Paul				Sandland			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Dave E. A.				Smith			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 3 of 3

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Richard				Simmons			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Lee				Vencklasen			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

PATENTEE: Dan Meisburger, Alan D. Brodie, Zhong-Wei Chen, Jack Y. Jau
PATENT NO.: 5,717,204
ISSUED: February 10, 1998
TITLE: *INSPECTING OPTICAL MASKS WITH ELECTRON BEAM
MICROSCOPY*
SERIAL NO.: 606,854
FILING DATE: February 26, 1996
ATTY. DKT. NO.: 4764

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

OFFER TO SURRENDER

Sir:

The undersigned Applicants of the accompanying Application entitled Inspecting Optical Masks With Electron Beam Microscopy, for reissue of U.S. Letters Patent No. 5,717,204, granted to them on February 10, 1998 of which KLA-Tencor Corporation is now sole owner by assignment recorded in the United States Patent and Trademark Office at Reel 7238, Frame 0244, and as evidenced by the certificate of name change (a copy of which is attached) and on whose behalf and with whose assent the accompanying application is made, hereby offers to surrender said Letters Patent.

DATE

By: _____
Dan Meisburger

DATE

By: _____
Alan D. Brodie

DATE

By: _____
Zhong-Wei Chen

DATE

By: _____
Jack Y. Jau

ASSENT OF ASSIGNEE TO REISSUE

The undersigned assignee of the entire interest in the above-mentioned Letters Patent hereby assent to the accompanying Reissue Application.

DATE

By: _____

Name:

Title:

Certificate Under 37 CFR § 3.73(b)

Applicants:	Dan Meisburger, Alan D. Brodie, Zhong-Wei Chen, Jack Y. Jau
Patent No.:	5,717,204
Issue Date:	February 10, 1998
Application No.:	606,854
Filing Date:	February 26, 1996
Name of Assignee:	KLA-Tencor Corporation
Type of Assignee (e.g. corporation, partnership, university, government agency, etc.):	Corporation

The above-mentioned Assignee certifies that it is the assignee of the entire right, title and interest in the patent application identified above by virtue of either:

A. ☒ An assignment from the inventor(s) of the patent application identified above. The assignment was recorded in the Patent and Trademark Office at Reel 7238, Frame 0244, or for which a copy thereof is attached; OR

B. ☐ A chain of title from the inventor(s), of the patent application identified above, to the current assignee as shown below:

1. From: _____
To: _____
The document was recorded in the Patent and Trademark Office at
Reel: _____ and Frame: _____, or for which a copy thereof is attached.
2. From: _____
To: _____
The document was recorded in the Patent and Trademark Office at
Reel: _____ and Frame: _____, or for which a copy thereof is attached.
3. From: _____
To: _____
The document was recorded in the Patent and Trademark Office at
Reel: _____ and Frame: _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.

☒ A certificate of name change from KLA Instruments Corporation to KLA-Tencor is attached.

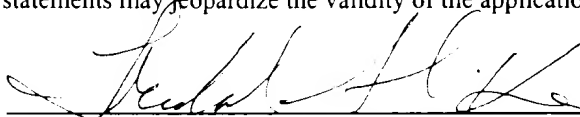
The undersigned has reviewed all the documents in the chain of title of the patent application identified above and, to the best of undersigned's knowledge and belief, title is in the assignee identified above.

The undersigned (whose title is supplied below) is empowered to sign this certificate on behalf of the assignee.

I hereby declare that all statements made herein of my own knowledge are true, and that all statements made on information and belief are believed to be true; and further, that these statements are made with the knowledge that willful false statements, and the like so made, are punishable by fine or imprisonment, or both, under Section 1001, Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Feb. 10, 2000

Date



Signature

Trinidad Arriola-Kern, Reg. No. 44,012

Attorney for Applicant